

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Right to Rise USA

ADDRESS (number and street)

c/o Clark Hill PLC, Ste.1300 South

Check if different
than previously
reported. (ACC)

1001 Pennsylvania Ave. NW

Washington

DC

20004

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00571372

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☒ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Spies, Charles, R., ,

Type or Print Name of Treasurer

Signature of Treasurer

Spies, Charles, R., ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Right to Rise USA

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
11		29		2016

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2016</td></tr></table>	Y	Y	Y	Y	Y	2016						<table><tr><td colspan="5">58578054.21</td></tr></table>	58578054.21				
Y	Y	Y	Y	Y													
2016																	
58578054.21																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">3365051.78</td></tr></table>	3365051.78															
3365051.78																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">8875.12</td></tr></table>	8875.12					<table><tr><td colspan="5">3388188.58</td></tr></table>	3388188.58									
8875.12																	
3388188.58																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">3373926.90</td></tr></table>	3373926.90					<table><tr><td colspan="5">61966242.79</td></tr></table>	61966242.79									
3373926.90																	
61966242.79																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">7063.48</td></tr></table>	7063.48					<table><tr><td colspan="5">58599379.37</td></tr></table>	58599379.37									
7063.48																	
58599379.37																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">3366863.42</td></tr></table>	3366863.42					<table><tr><td colspan="5">3366863.42</td></tr></table>	3366863.42									
3366863.42																	
3366863.42																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Right to Rise USA

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
11		29		2016

To:

M M	/	D D	/	Y Y Y Y Y Y
12		31		2016

I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

455513.26

(ii) Unitemized

0.00

9638.01

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

0.00

465151.27

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5).....▶

0.00

465151.27

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

2897753.34

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

8875.12

25283.97

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

8875.12

3388188.58

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

8875.12

3388188.58

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	7063.48	5154242.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7063.48	5154242.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	39605692.40
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	13757674.57
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	30270.35
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	13787944.92
29. Other Disbursements (Including Non-Federal Donations).....	0.00	51500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7063.48	58599379.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7063.48	58599379.37

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	465151.27
34. Total Contribution Refunds (from Line 28(d))	0.00	13787944.92
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	-13322793.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	7063.48	5154242.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	2897753.34
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	7063.48	2256488.71

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 9

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Right to Rise USA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PINNACLE LIST COMPANY

Mailing Address 2800 S. SHIRLINGTON ROAD
SUITE 401

City
ARLINGTON

State
VA

Zip Code
22206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19655.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 19 / 2016

Transaction ID : SA17.6073

Amount of Each Receipt this Period

6471.90

☐ Memo Item

LIST RENTAL INCOME

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PINNACLE LIST COMPANY

Mailing Address 2800 S. SHIRLINGTON ROAD
SUITE 401

City
ARLINGTON

State
VA

Zip Code
22206

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

19655.08

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 28 / 2016

Transaction ID : SA17.6074

Amount of Each Receipt this Period

2403.22

☐ Memo Item

LIST RENTAL INCOME

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

8875.12

8875.12

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 9

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Right to Rise USA

Full Name (Last, First, Middle Initial)

A. CMDI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		06		2016

Mailing Address 1593 SPRING HILL RD
SUITE 400City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I6065

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2016

Mailing Address P.O. BOX 650448

City
DALLASState
TXZip Code
75265Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I6064

Amount of Each Disbursement this Period

325.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GOOGLE.COM

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2016

Mailing Address 1600 AMPHITHEATRE PKWY

City
MOUNTAIN VIEWState
CAZip Code
94043Purpose of Disbursement
SUBSCRIPTION - EMAIL

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Transaction ID : SB21B.I6069

Amount of Each Disbursement this Period

80.00

☒ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1325.98

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 9

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Right to Rise USA

Full Name (Last, First, Middle Initial)

A. MAILCHIMPMailing Address 675 PONCE DE LEON AVE NE
SUITE 5000City
ATLANTAState
GAZip Code
30308Purpose of Disbursement
SUBSCRIPTION - EMAIL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2016

FEC Identification Number

C

Transaction ID : SB21B.I6070

Amount of Each Disbursement this Period

40.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SLACK

Mailing Address 155 5TH STREET, 6TH FLOOR

City
SAN FRANCISCOState
CAZip Code
94103Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2016

FEC Identification Number

C

Transaction ID : SB21B.I6071

Amount of Each Disbursement this Period

180.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. STRATEGIC SOLUTIONS

Mailing Address 3724 DUNBARTON DR.

City
MOUNTAIN BROOKState
ALZip Code
35223Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2016

FEC Identification Number

C

Transaction ID : SB21B.I6067

Amount of Each Disbursement this Period

5400.00

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

5400.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 9

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Right to Rise USA

Full Name (Last, First, Middle Initial)

A. CMDIMailing Address 1593 SPRING HILL RD
SUITE 400City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2016

FEC Identification Number

C

Transaction ID : SB21B.I6066

Amount of Each Disbursement this Period

337.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

337.50

7063.48